Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Shell USA, Inc. Employees' Political Awareness Committee 1050 K Street NW, Suite 700 ADDRESS (number and street) (Check if address is changed) Washington 20001-4449 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fecinfo@pass1.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2022 C00039503 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Toohey, Camden, , , Type or Print Name of Treasurer Toohey, Camden,,, [Electronically Filed] 03 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	n below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
Name of Candidate	<u></u>
Candidate Office Party Affiliation Sought: House Senate Pres	Statesident
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	nittee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6	S.) Its connected organization is a
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a sep committee. (i.e., nonconnected committee)	parate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceed	
committees/organizations, at least one of which is an authorized committee of a federal ca (h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	eds for two or more political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

FEC Form 1 (Revised	d 02/2009)	Page 3
Write or Type Committee Nar	me	
Shell USA, Inc	c. Employees' Political Awareness Con	nmittee
	d Organization, Affiliated Committee, Joint Fundraising Representative, o	
Shell USA, Inc.	<u> </u>	
Mailing Address	P.O. Box 2463	
	Houston TX	77252
	CITY STATE	ZIP CODE
Relationship: x Connect	ted Organization Affiliated Committee Joint Fundraising Representati	ive Leadership PAC Sponsor
7. Custodian of Records: Id books and records.	dentify by name, address (phone number optional) and position of the per	rson in possession of committee
	n, Krista, , ,	
Full Name L Mailing Address	1050 K Street, NW Suite 700	
Mailing Address		
	Washington	20001
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		02 856 5693
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; a ., assistant treasurer).	and the name and address of
Full Name Toohey,	Camden, , ,	1
Mailing Address	1050 K Street, NW Suite 700	
J		
	Washington	20001
Title or Position Treasurer	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Whitm Agent	nan, Kristin, , ,		_
Mailing Address	1050 K Street NW Suite 700		
		7.5	
	Washington	DC 200 STATE	001-4449 ZIP CODE
Title or Position Assistant Treasurer	Telephone r	number 202	6714
safety deposit boxes or Name of Bank, Deposito	ory, etc.	milee deposies iurius,	Tiolog adocume, Tomo
safety deposit boxes or Name of Bank, Deposito	maintains funds.		
safety deposit boxes or Name of Bank, Deposite	maintains funds. ory, etc.	TX 770	
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Form/Schedule: F1A
Transaction ID:

This amended registration is being filed to update the committee and connected organization's name and the assistant treasurer's phone number. Please make the necessary changes to your records.

Form/Schedule: Transaction ID: